PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Dock t Number

09/486531

CLAIMS AS FILED - PART I (Column 1) (Column 2)								•	SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
FOR			(Column 1) NUMBER FILED		_	NUMBER EXTRA		ſ	RATE	FEE	OR [RATE	FEE
									TIATE	345.00	OR	10112	-690:00
BASIC FEE				· · · · · · · · · · · · · · · · · · ·						040.00			
TO	TAL CLAIMS		106			* 86			X\$ 9=		OR	X\$18=	1548
IND	EPENDENT CL	AIMS	10) minus	3 =	• 7			X39=		OR	X78=	546
MULTIPLE DEPENDENT CLAIM PRESENT					es			+130=		OR	+260=	260	
* If the difference in column 1 is less than zero, enter "0" in column 2								•	TOTAL		OR	TOTAL	3194
CLAIMS AS AMENDED - PART II									OTHER T				
			umn 1) AIMS		<u> </u>	Column 2) HIGHEST	(Column 3)	l	O.IIIAEE I	ADDI-	U		ADDI-
AMENDMENT A		REN	MAINING FTER NOMENT		Р	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•		Minus	•••		=		X\$ 9=		OR	X\$18=	
	Independent	•		Minus	••		=		X39=		OR	X78=	
/	FIRST PRESE	NTATI	ON OF M	JLTIPLE DE	PEN	DENT CLAIM	·	1	+130=		OR	+260=	
									TOTAL			TOTAL	
							(0.1		ADDIT. FEE		lou	ADDIT. FEE	
<u> </u>			lumn 1)			Column 2) HIGHEST	(Column 3)	1		ADDI-		<u></u>	ADDI-
AMENDMENT B		RE	MAINING AFTER INDIMENT		F	NUMBER PREVIOUSLY PAID FOR,	PRESENT EXTRA		RATE	TIONAL	,	RATE	TIONAL FEE
	Total	0	RP	Minus	•	11110	=		X\$ 9=	·	OR	X\$18=	
É	Independent	. /	\bigvee	Minus		70	=		X39=		OR	X78=	
L	FIRST PRESE	NTAT	ØN OF M	ULTIPLE DE	PEN	IDENT CLAIM		٠ ل	+130=			+260=	
						,			TOTAL		OR	TOTAL	
				•			•	•	ADDIT. FEE	<u> </u>	OR	ADDIT. FEE	
L	(Column 1) (Column 2) (Column 3)								·		:	<u> </u>	
NFC		, RE	LAIMS MAINING AFTER ENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	+	ENDINGIN	Minus			= 7.2	1	X\$ 9=		OR	X\$18=	
MEN	independent	1.		Minus	1.	**	=]	X39=		OR	X78=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							j	<u> </u>				
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+130=		OR	+260=	
	If the Wighest No	mhar	Provincesty F	Paid For IN Th	HIS S	PACE is less th	an 20, enter 729	0."	TOTAL ADDIT. FEE		OR	ADDIT. FEE	
1.	"If the "Highest N	umber	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 1, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 1, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 1, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 1, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 1, enter "3."										

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		CLAIMS AS (C	olumn 1)	SMALL E		OR	OTHER SMALL E			
FO	R	NUMBE	R FILED	NUMBER E	XTRA	RATE	FEE		RATE	FEE
BA	SIC FEE						345.00	OR		-690.00
то	TAL CLAIMS	101	minus 20	0= 86		X\$ 9=		OR	X\$18=	1548
IND	EPENDENT CL	AIMS /C) minus 3	X39=		OR	X78=	546		
MU	LTIPLE DEPEN	DENT CLAIM PR	ESENT	+130=		OR	+260=	260		
• If	the difference	TOTAL		OR	TOTAL	3194				
	Cl	LAIMS AS A	MENDED	OTHER THAT SMALL ENTITY OR SMALL ENTITY				THAN		
		(Column 1) CLAIMS	·	SMALL			SWALL			
AMENDMENT A	REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	٠	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	=	X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***	=	X39=		OR	X78=	
_	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT CLAIM		+130=		OR	+260=	
	· ·					TOTAL			TOTAL	
		ADDIT. FEEOH ADDIT. FEE								
		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	-	ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	=	X39=		OR	X78=	
	FIRST PRESE									
					·	+130=		OR	+260=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)		· ·	_		:
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
NON	Total	•	Minus	**	= , %.	X\$ 9=		OR	X\$18=	
AME	Independent	1.	Minus	***	=	X39=		OR	X78= .	
L	FIRST PRESE	NTATION OF M	J			000				
	If the entry in colo	mn 1 is less than t	he entiry in colu	rnn 2, write "0" in co	lumn 3.	+130=		OR	+260= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE										
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										